

<b>FORM</b> <b>5</b> Rev 02/08	State of Colorado <b>Oil and Gas Conservation Commission</b> 1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109		DE ET OE ES
<b>DRILLING COMPLETION REPORT</b>			Document Number:  400153604
This form is to be submitted within 30 days of the setting of production casing, the plugging of a dry hole, the deepening or sidetracking of a well, or any time the wellbore configuration is changed. If the well is deepened or sidetracked a new Form 5 is required. If an attempt has been made to complete/produce a well, then the operator shall submit Form 5A (Completed Interval Report.) If the well has been plugged, a form 6 (Well Abandonment Report) is required.			
Completion Type <input checked="" type="checkbox"/> Final completion <input type="checkbox"/> Preliminary completion			
1. OGCC Operator Number: <u>100264</u>		4. Contact Name: <u>Wanett McCauley</u>	
2. Name of Operator: <u>XTO ENERGY INC</u>		Phone: <u>(505) 333-3630</u>	
3. Address: <u>382 CR 3100</u>		Fax: <u>(505) 333-3284</u>	
City: <u>AZTEC</u>	State: <u>NM</u>	Zip: <u>87410</u>	
5. API Number <u>05-067-09840-00</u>		6. County: <u>LA PLATA</u>	
7. Well Name: <u>UTE GOVT</u>		Well Number: <u>101</u>	
8. Location: QtrQtr: <u>NESW</u> Section: <u>36</u> Township: <u>33N</u> Range: <u>7W</u> Meridian: <u>N</u>			
Footage at surface: Distance: <u>1419</u> feet Direction: <u>FSL</u>		Distance: <u>1351</u> feet Direction: <u>FWL</u>	
As Drilled Latitude: <u>37.057160</u>		As Drilled Longitude: <u>-107.564400</u>	
GPS Data: Data of Measurement: <u>04/27/2011</u> PDOP Reading: <u>1.6</u> GPS Instrument Operator's Name: <u>D. Fosdeck</u>			
** If directional footage at Top of Prod. Zone		Dist.: <u>1919</u> feet. Direction: <u>FSL</u>	Dist.: <u>2437</u> feet. Direction: <u>FWL</u>
Sec: <u>36</u>		Twp: <u>33N</u>	Rng: <u>7W</u>
** If directional footage at Bottom Hole		Dist.: <u>1978</u> feet. Direction: <u>FSL</u>	Dist.: <u>2490</u> feet. Direction: <u>FWL</u>
Sec: <u>36</u>		Twp: <u>33N</u>	Rng: <u>7W</u>
9. Field Name: <u>IGNACIO BLANCO</u>		10. Field Number: <u>38300</u>	
11. Federal, Indian or State Lease Number: <u>I-22-IND-2759</u>			
12. Spud Date: (when the 1st bit hit the dirt) <u>04/13/2011</u>			
13. Date TD: <u>04/17/2011</u>		14. Date Casing Set or D&A: <u>04/17/2011</u>	
15. Well Classification: <input type="checkbox"/> Dry <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Gas/Coalbed <input type="checkbox"/> Disposal <input type="checkbox"/> Stratigraphic <input type="checkbox"/> Enhanced Recovery <input type="checkbox"/> Storage <input type="checkbox"/> Observation			
16. Total Depth MD <u>3315</u> TVD** <u>2941</u>		17 Plug Back Total Depth MD <u>3263</u> TVD** <u>2890</u>	
18. Elevations GR <u>6412</u> KB <u>6424</u>		One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available.	
19. List Electric Logs Run: Compensated Photo Density/Compensated Dual Neutron Log Hole Volume Caliper Log Compact Triple Combo Quicklook Log Array Induction-RTAP Shallow Focused Electric Log			
20. Casing, Liner and Cement:			

**IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.**

CASING

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
SURF	12+1/4	8+5/8	24#	0	425	320	0	425	VISU
1ST	7+7/8	5+1/2	17#	0	3,315	375	0	3,315	CBL

ADDITIONAL CEMENT

Cement work date: \_\_\_\_\_

Details of work:

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom

21. Formation log intervals and test zones:

FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
ANIMAS	904		<input type="checkbox"/>	<input type="checkbox"/>	
OJO ALAMO	1,362		<input type="checkbox"/>	<input type="checkbox"/>	
KIRTLAND	1,517		<input type="checkbox"/>	<input type="checkbox"/>	
FRUITLAND COAL	2,578		<input type="checkbox"/>	<input type="checkbox"/>	
PICTURED CLIFFS	3,197		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: \_\_\_\_\_ Print Name: Wanett McCauley

Title: Reg Compliance Technician Date: 5/6/2011 Email: wanett\_mccauley@xtoenergy.com

**Attachment Check List**

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400162658	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400162664	Directional Survey **	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	DST Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Logs	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<u>Other Attachments</u>			
400153604	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400162695	LAS-	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

**IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.**

**General Comments**

**User Group**

**Comment**

**Comment Date**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>

Total: 0 comment(s)